

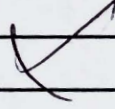
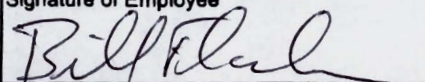
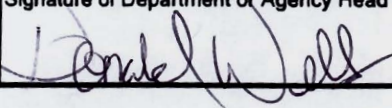
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JUN 03 2010

PIERCE COUNTY
AND OPERATIONS

PIERCE COUNTY REPORT OF INCIDENT OR UNSAFE CONDITION

(Do NOT use to report County-owned VEHICLE damage OR County EMPLOYEE INJURIES)

| | | | |
|--|---|--|--|
| Department Public Works - Road Ops | | Your Department's Risk Management BARS Code: 150.100.6200.54290 .46.0030 | |
| Employee Completing Report | Employee Name Bill FLANNERS | | |
| | Division, Section, Etc. Roads | | |
| | Work Address 4812 196th ST | | |
| | Work Phone 98387 | | Age 253-798-6000 |
| Person Injured/Involved In the Accident or Incident | Name Bill FLANNERS | | |
| | Home Address 19040 SE 408th ENUMCLAW | | Home Phone 360-825-6742 |
| | Occupation H E O | | |
| | Employed By: PIERCE COUNTY | | Work Phone |
| | What was the involved person doing at the time of accident or incident? CLEANING DITCH WITH BACKHOE | | |
| Date, Time and Place | Date 5-26-10 | Time 2:30 | A.M. <input type="checkbox"/> P.M. <input checked="" type="checkbox"/> |
| | Location 5519 144th ST | | |
| The Injury | Nature and extent of injury | | |
| | Where was injured taken after accident?  | | Name of Doctor |
| | Why was injured on premises? | | |
| Property Damage or Theft of Property | Owner's Name | | Home Phone |
| | Address | | |
| | List damage: HIT 2 PHONE LINE CABLES | | |
| | Police Case #: | | |
| Description of Accident, Incident or Unsafe Condition | (Attach additional sheets if necessary.) WHILE CLEANING DITCH, THE BROKE 2 PHONE CABLES DOE THEY WERE NOT BURIED deep enough | | |
| | Locates Required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Locate #: | | |
| Describe 1st Aid: | | PARKS - Did person resume skating? YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Witnesses | Name | Address | Wk Phone Hm Phone |
| | Name | Address | Wk Phone Hm Phone |
| | Date, location and badge # or name of police authority to whom incident was reported: | | |
| Date 5-26-10 | Signature of Employee  | Signature of Department or Agency Head  | |

Return completed form to:

PIERCE COUNTY RISK MANAGEMENT
955 Tacoma Avenue South, Suite 303
Tacoma, WA 98402



2010/05/26

2010/05/26





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